

COLUSA COUNTY
CHILDREN AND FAMILIES COMMISSION

**ASSESSMENT OF
COMMUNITY NEEDS
AND RESOURCES**

Revised: June 16, 2000

**Children and Families Commission
Colusa County Courthouse
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COLUSA COUNTY CHILDREN AND FAMILIES COMMISSION

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COLUSA COUNTY CHILDREN AND FAMILIES COMMISSION ASSESSMENT OF COMMUNITY NEEDS AND RESOURCES

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Colusa County Children and Families Commission Assessment of Community Needs and Resources

1. EXECUTIVE SUMMARY

In November 1998, the California electorate voted in favor of Proposition 10, the "Children and Families First" initiative, which then became effective on January 1, 1999. The initiative levies a tax on cigarettes and other tobacco products in order to provide funding for local early childhood development programs. The intent of the initiative is twofold: to increase community awareness of the negative effects of tobacco consumption, particularly on young children, and to create a locally determined and comprehensive system of information and services for children in the five-and-under age group. The ultimate goal is to enhance the early growth experiences of children, enabling them to be more successful in their school careers and lead better lives.

Pursuant to the requirements of Proposition 10, the Colusa County Board of Supervisors adopted an ordinance in February 1999 establishing the county's Children and Families Commission, comprised of five members appointed by the Board of Supervisors. The county Commission's duties include evaluating the current and projected needs of young children and their families, developing a strategic plan that promotes a comprehensive and integrated system of early childhood development services that addresses community needs, determining how to expend local monies available from the state Children and Families Trust Fund, and evaluating the effectiveness of programs and activities funded in accordance with the strategic plan.

Purpose of the Report

The strategic plan adopted by the county Commission must contain goals and objectives that articulate what the Commission seeks to accomplish within Colusa County by utilizing the resources available under Proposition 10. It also must identify strategies that will be pursued in order to achieve the goals and objectives. In order to develop effective goals, objectives and strategies, it is necessary to have a solid understanding of the challenges and opportunities facing children prenatal to five years old and their families.

This report is intended to provide the information needed by the Commission to craft a strategic plan that produces the greatest possible value for young children and their families in Colusa County. It provides a socio-demographic profile of the county, analyzes challenges and concerns facing children and families, and assesses strengths and gaps in community services available to children and families. Throughout, all efforts have been made to focus the assessment on children prenatal to five years old and their families, as this is the group targeted by Proposition 10.

Data Collection Methods

A three-tiered approach was used to obtain the information for the needs and assets assessment.

1. A tremendous number of reports, studies, surveys, community forums, and other information-gathering activities have been performed during the past three years that provide valuable input to the issues facing young children and their families. A concerted effort was made to identify all existing sources of relevant data, obtain and review copies of materials, and incorporate the results into the needs assessment. A list of materials that were used in preparing this report can be found in Appendix A.
2. Five community forums or "town meetings" were held in different locations within the county. Town meetings were conducted in Colusa, Williams, Arbuckle, Maxwell and Grimes. The purpose of the town meetings was to obtain direct, interactive opinions from people in the community regarding the primary needs of young children and families with young children and the extent to which existing community resources are meeting those needs. Discussion groups were conducted in both English and Spanish to help overcome language barriers. A total of 53 people attended the town meetings. The complete results of the town meetings are contained in Appendix B.
3. Two separate surveys were conducted. One survey was targeted to parents, seeking specific information regarding the needs of young children and families, knowledge of existing services, barriers to accessing services, and desired changes in services. A total of 59 responses were received to the parent survey. The other survey was targeted to service providers and professionals that work with young children and families. This survey solicited input regarding available resources, primary needs of families and young children within each of several different topic areas (health care, child care, early childhood development, parenting, and other), and strengths of the existing system of services within the same topic areas. A total of 261 surveys were issued, which included all kindergarten – grade 3 teachers and child care providers in the county, and 42 responses were received (16% response rate).

The extensive amount of information gathered and the consistency of findings across all data sources should create a high level of confidence in the validity of findings in this report.

Summary of Findings

The key findings on issues affecting children prenatally through age 5 and their families are outlined below. Note that no attempt has been made to prioritize the various issues. Prioritization of community needs will occur during the process of developing goals, objectives and strategies for the strategic plan. Information about priorities was captured during the town meetings and surveys, and is reflected in the summaries contains in Appendices B, C and D to this report.

Findings are organized into major categories found in section 3 of this report.

HEALTH

- ✍✍ Access to health care services was identified in both the parent and provider surveys as the biggest challenge facing young children and families in Colusa County. In the parent survey, 47% of respondents said that access to health care was a “very large problem” for both themselves and their children.
- ✍✍ The problems with access can be understood in light of the current limits to health care service capacity. The county’s population-to-primary-care-physician ratio of 4111:1 is over double the national guidelines. Very few specialists, such as pediatricians or obstetricians, practice in the county. No local low-cost options exist for medical care during off-hours or on weekends; the need for urgent care services was identified by parents and service providers alike as a high priority. Further, the largest health care provider in the county, Colusa Community Hospital, has filed for bankruptcy and faces possible closure or reductions in service depending on the decisions of the new ownership. Lack of reliable transportation presents a huge barrier for many people attempting to access those services that are available.
- ✍✍ A relatively low 51% of the MediCal eligible population actually utilize this program, yet many low-income parents have stated in recent surveys that they do not have medical insurance and do not take their children to the doctor for preventative care. In the parent survey, 46% of respondents stated that they didn’t have health insurance for themselves and 22% did not have health insurance for their children.
- ✍✍ A low percentage of women (65% in 1997) begin prenatal care in the first trimester of pregnancy, significantly under the state target of 90%. Further, an even lower percentage of women receive adequate prenatal care throughout their pregnancy (56% over the three year period from 1995 – 1997).
- ✍✍ A relatively low 40% of mothers indicate they intend to exclusively breastfeed their infants in the early post-partum period, as compared to the Healthy People 2000 objective of 75%.
- ✍✍ On the positive side, the rate of low birth weight babies in the county is significantly lower than the state average. No maternal HIV infections have been recorded in over 10 years. Over 95% of young children receive their immunizations.
- ✍✍ Significant concerns exist about the rate of drug and alcohol abuse within the county. A recent community survey found that 66% of respondents believe that drug abuse is a major community problem and 59% identified alcohol abuse as a major problem.
- ✍✍ Access to pediatric dental services is also a significant problem. Only two dental offices in the county (Colusa and Arbuckle) accept Denti-Cal clients, and only one dental office in the county (in Arbuckle) provides Child Health and Disability Prevention (CHDP) dental treatment services. 44% of respondents to the parent survey identified access to dental care for children as a “very large problem or challenge.”

- ✍✍ Inadequate use of car seats to prevent injuries to small children is a concern. Low-income families in particular have difficulty obtaining adequate car restraints.

EDUCATION

- ✍✍ There is a low level of educational attainment among adults in the county. Almost 39% of people 18 years or older do not have a high school diploma, and for an additional 45% of the residents, a high school diploma is their highest degree. 52% of births are to women with less than 12 years education.
- ✍✍ Children who have limited English speaking skills have major challenges within the school system. County Office of Education data indicates that 45% of the county's children are of limited English proficiency. Improved early language and literacy development was identified as a major priority by 35% of teachers and other service providers surveyed for this report.

ECONOMICS

- ✍✍ The unemployment rate is consistently high, averaging 20.8% during 1998 and reaching a high of 32.3% in January 1998. The problem may get worse inasmuch as a recent Strategic Action Plan by the County Planning and Building Department noted that the county will need 4,071 new jobs by the year 2006 just to maintain an 18% unemployment rate.
- ✍✍ A high rate of poverty exists among families. 18% of children under the age of 6 are below the poverty level, and 95% of agricultural families are living at or below the poverty level.

SAFETY

- ✍✍ The county enjoys a low crime rate, particularly with a rate of violent crime that is less than half the state average. A recent survey found that 70% of respondents feel quite safe or extremely safe in their neighborhoods.
- ✍✍ The rate of domestic violence is increasing, as evidenced by a 30% jump in spousal abuse arrests, 243% increase in crisis calls to the domestic violence shelter, and 2,650% increase in protective orders issued over the four year period from 1994 – 1998.
- ✍✍ The number of child abuse and neglect referrals dropped 59% from 1994 to 1998. However, it is unclear that this indicates a truly lower rate of child abuse or simply less reporting of abuse. A recent report identified 978 children at risk for abuse or neglect.

CHILD CARE AND CHILD DEVELOPMENT

- ✍✍ A significant shortage of child care slots exists in the county. Only 573 slots are available yet 819 are needed just for children ages 0 – 5 (a shortfall of 246) plus 1,695 more slots are needed for children ages 6 – 13. A long waiting list also exists for the Head Start program targeted to 3 and 4 year old children. Only one infant care center exists in the county, which is in Arbuckle. 50% of respondents to the parent survey said that access to quality child care was one of the biggest challenges affecting the well-being of their children.
- ✍✍ Current child care options can cost a significant amount of a family's household income. A family with two children in child care is likely to spend 25% of their income on child care. Some subsidies and programs are available for specific groups of low-income families but no relief is available for those who do not meet the income and other eligibility guidelines for county child care services.
- ✍✍ A significant need exists for more child care services during non-traditional hours, and also for seasonal care that is available to the migrant farm labor population.
- ✍✍ Parents are overall quite satisfied with their child care services. Satisfaction levels are high across all settings (day care homes, Head Start, private preschools, etc.).
- ✍✍ There is a strong desire among parents and service providers alike to expand access to preschools that are able to address early childhood education needs in a safe and healthy environment that also meets the child care needs of parents.
- ✍✍ Greater access to parenting education is needed. 45-51% of respondents in recent parent surveys said they would like more information and education about parenting, yet coordinating meetings between local service providers have indicated that existing parent education programs are under-utilized. Expansion of parent education programs was also identified in the latest provider survey as one of the top overall priorities, noted as a high priority by 40% of respondents.

CULTURALLY UNIQUE ISSUES

- ✍✍ Language barriers and cultural preferences appear to be significant inhibitors for many Hispanic/Latino persons to seek health, education and other services. 35% of parents surveyed said that language differences are one of the greatest challenges they face as parents. Increasing outreach and access to services among the Hispanic/Latino population is a major need given that 69% of births are to Hispanic mothers and 50% of all children in the 0 – 4 and 5 – 9 age groups are Hispanic.
- ✍✍ The growth in the Native American population has been paralleled by the growth of a successful gaming business, creating resources for health and day care services to address the needs of the Native American community in the county.

RECREATION

- ✍✍ The county enjoys many outdoor recreation facilities including twenty parks, four public swimming pools, and various other recreational facilities. Aside from these sites, there is relatively little for children to do within the county. Significant interest was expressed in the recent town meetings to pursue improvements in local parks and playgrounds, as well as to establish organized play groups and other means of promoting recreation among young children and their parents.

TRANSPORTATION

- ✍✍ Transportation is a huge barrier for many people to gain access to services and employment. In 1997, 38% of people receiving Aid to Families with Dependent Children had no automobile available to them. Cars that are owned are often not reliable. The lack of transportation was identified as a “very large problem or challenge” by 36% of respondents to the recent parent survey, and 67% of service providers identified transportation as a major barrier for access to health care services in particular.
- ✍✍ Public transit options are limited between many communities, with public transit being moderately convenient (based on bus schedules) only between Colusa and Williams. In the town meetings, a number of parents expressed frustrations over transportation such as transit services being unavailable, unreliable, and not accessible in Spanish.

SPECIAL NEEDS AND OTHER FAMILY ISSUES

- ✍✍ There are not a high number of children with physical and/or mental disabilities within the county – 53 such children have been identified in Colusa County as of March 2000. Young children with special needs are capably served through Head Start and programs of the Office of Education Special Education Department. Challenges noted in this area are difficulties in recruiting staff to work with special needs children and insufficient classroom time devoted to special needs students.

COMMUNITY RESOURCES AND SERVICE DELIVERY SYSTEMS

- ✍✍ Over 25 different government-based programs are operating in Colusa County to deliver a broad array of services to young children and families. Many people are served through these programs, as shown in the charts in section 4 of this report. At the same time, service levels are not close to meeting the level of demand for many types of services.

- ✍✍ Other than in the areas of health care and child care, very few services exist in the private sector. There are no social service nonprofit organizations and no community foundations within the county. This creates a situation where most services are dependent on annual local, state and federal budget decisions and can only be accessed by people who meet government eligibility guidelines. Lack of eligibility for available services was identified as the most significant barrier facing parents in the survey conducted for this assessment; 67% of respondents rated eligibility as a “very large barrier” for accessing services.
- ✍✍ Many services are centralized in the City of Colusa. Limited services are available in Williams and Arbuckle, and virtually no services are available in other communities such as Maxwell, Grimes, Princeton and Stonyford, even on an occasional outreach basis. Given the difficulties with transportation, child care and other needs, the current structure effectively cuts off access to services for many families in all but emergency situations.
- ✍✍ People need more information about services that are available and assistance in gaining access to those services. In the survey of parents conducted for this assessment, for example, the lack of information was identified as a “very large barrier” by 51% of respondents. This was the third greatest barrier behind eligibility for services and cost.
- ✍✍ A number of councils and task forces have been established to improve the coordination of services in areas such as child abuse prevention, domestic violence, and promotion of breastfeeding. These groups can serve as important forums to plan and implement a stronger system of services to meet community needs. At the same time, it has been recently noted by representatives of these groups that previous needs assessments have not resulted in planned, coordinated responses or program development. It is imperative that we take the opportunity presented by the strategic plan for the Children and Families Commission to create a comprehensive, countywide plan for an integrated system of services that truly meets the needs of young children and parents.

2. COMMUNITY DESCRIPTION AND DEMOGRAPHIC PROFILE

This section provides an overview to the geography, localities, and residents of Colusa County.

Area Description

Colusa County was incorporated in 1851. The name Colusa is derived from the name of a Native American society or tribe living on the west side of the Sacramento River in what is now Colusa County. The county is located in the heart of the Sacramento Valley, approximately 40 miles north of Sacramento and 90 miles northeast of San Francisco. Interstate 5, a main north/south thoroughfare, runs through the center of Colusa County and borders the City of Williams and the unincorporated communities of Arbuckle to the south and Maxwell and Delevan to the north. The sparsely populated foothills to the west include the communities of Sites, Lodoga and Stonyford. Princeton, Grimes, and the City of Colusa (the only other incorporated city) are located along the Sacramento River. College City to the south is located between the communities of Grimes and Arbuckle.

The county spans 1,156 square miles. Much of the land is devoted to agriculture, comprising the main industry and economic base of the county. Five of the most important crops produced in the county are rice, processing tomatoes, sugar beets, prunes, and nuts (walnuts and almonds). Crops within the county are becoming more diversified over the last few years, and several processing plants are located in the county.

Population Profile

The chart below summarizes key demographic attributes of the population of Colusa County.

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Total population	18,550 in 1998 (Colusa County Economic and Demographic Profile, CSU Chico, 1999)	The rate of population growth has slowed, with 0.82% annual change in 1997-98 compared to 1.85% annual change during the period 1990-1995. The total county population is projected to reach 25,300 in 2010 and 31,700 in 2020, representing an annual compounded growth rate of 2% during the next decade. (California Department of Finance)

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Based on location:		
?? City of Colusa	5,500 in 1998	The two incorporated areas represent 46% of the total population with the majority, 54%, living in unincorporated areas that are more rural and have more limited services. The population of Williams has jumped 35% since 1990, while the population of Colusa has climbed only 12% in the same period of time.
?? City of Williams	3,080 in 1998	
?? Unincorporated areas	9,970 in 1998 (Colusa County Maternal, Child, Adolescent Health Community Health Assessment and Local Plan, 1999-2004)	
Based on age:		
?? 0 – 4	1,238 in 1990 (U.S. Census)	Based on 1997 data from the Center for Health Statistics, an estimated 10%-10.5% of the population or 1,850 – 1,950 children are in the 0 – 5 age range targeted by Proposition 10. As the population grows, forecasts indicate that the percentage of children in 0 – 5 age range will hold constant, with significant growth occurring in the 5 – 19 age bracket.
?? 5 – 9	1,490	
?? 10 – 14	1,486	
?? 15 – 19	1,231	
?? 20 – 29	2,090	
?? 30 – 39	2,605	
?? 40 – 49	1,827	
?? 50 – 59	1,538	
?? 60 – 69	1,381	
?? 70+	1,359	
Based on ethnicity:		
?? White	55.9% in 1997	Data compiled in 1996 for the Colusa County strategic plan showed a disproportionate percentage of Hispanic persons in the younger age groups. Roughly 50% of children ages 0 – 4 and 5 – 9 are Hispanic, whereas less than 20% of the County's population age 40 and over are Hispanic.
?? Hispanic	40.1%	
?? Native American	1.7%	
?? Asian	1.9%	
?? Black	0.4%	
	(Center for Health Statistics)	
Birth rate	307 in 1997 The number of births has ranged between 302 and 334 every year from 1991 through 1997 (Colusa County Maternal, Child, Adolescent Health Community Health Assessment and Local Plan)	The county's birth rate is consistently below the state average. In 1996, almost 69% of all births were to Hispanic/Latino mothers, 29% were White, and only 2% for all other ethnic groups combined. Births to teens 15 to 17 years old totaled 15 in 1996 and 17 in 1997; both years represented a significant decline from 1993 – 1995 where each year had between 24 and 28 teen births. In 1997, 29% of births were to unmarried mothers and 52% were to mothers with less than 12 years education. (Center for Health Statistics, California Department of Health Services)

The population of Colusa County experiences considerable seasonal fluctuations. According to a 1996 report by Colusa Community Hospital, during the growing and harvest season between March 15th and November 15th, the migrant farm labor population and their dependents add an estimated 6,700 people to the county's population. In essence, the county's population is actually over 25,000 during this eight-month period.

Ethnicity is also changing rapidly. Williams Unified School District enrollment changed from a 65% Anglo population in 1994 to an 80% Hispanic population in 1998. Further, the migrant farm population is primarily Hispanic, changing the ethnic profile of the county even more significantly during the growing and harvest seasons.

3. COMMUNITY NEEDS

This section contains a compilation of community needs developed through analysis of publicly available data, county agency reports, previous needs assessments conducted by various groups, five town meetings conducted by the Children and Families Commission, and multiple community-based surveys. The analysis of community needs is organized by issue or topic area, as follows:

- Health
- Education
- Economics
- Safety
- Child Care and Child Development
- Culturally Unique Issues
- Recreation
- Transportation
- Special Needs and Other Family Issues

Health

Access to health services was identified as the #1 challenge affecting children in both the parent and provider surveys conducted for this assessment. 47% of respondents to the parent survey said that access to health care was a “very large problem” for both themselves and their children. A remarkable 81% of service providers surveyed indicated that they believe that the health care system in the county is inadequate to meet the needs of children and families. Access is impacted by several significant factors:

1. **Number of providers.** There are a relatively low number of health care providers in the county. The 1999 Maternal, Child, Adolescent Health (M.C.A.H.) Community Health Assessment noted that the county has only 4.5 full-time equivalent (FTE) family practice physicians, 3 of which provide obstetrical care. This produces a population-to-physician ratio of 4111: 1, considerably above the primary care guidelines of 2000:1. Long wait times and difficulties in scheduling appointments are often the results for parents. The only hospital in the county, Colusa Community Hospital, filed for Chapter 11 bankruptcy protection in 1999 and is now for sale with some risk of being closed altogether. Rural health clinics offering access to Child Health and Disability Prevention (CHDP) services and minor primary care needs are only open Monday through Friday, 9:00 a.m. to 5:00 p.m. After hours and weekend care within the county is only available at the hospital's emergency room at a higher cost; there are no urgent care facilities in the county for after hour and weekend care.
2. **Lack of insurance / ability to afford health care.** The parent survey conducted for this assessment found that 46% of parents do not have health insurance for themselves and 22% do not have health insurance for their children. The survey conducted for the

M.C.A.H. Community Health Assessment showed that 10-16% of respondents did not have medical or dental insurance for their children, and 9-16% take their children to the doctor only if there is a problem. Increasing access to programs such as MediCal, Healthy Families Insurance and Child Health and Disability Prevention (CHDP) exams for children from low-income families are outreach priorities in the county. In 1997, the average monthly usage of MediCal was 1,804 people or 9.7% of the county's population. This represented only 51% of the 3,531 people eligible for MediCal.

3. **Location of services and lack of transportation.** Many people in Colusa County are precluded from seeking health services from outside the county due to both distance and geographic/climatic barriers. The distances from Colusa to the closest other medical services are 37 miles to Marysville / Yuba City, 34 miles to Willows, 49 miles to Woodland, and 49 miles to Chico. During the three to four month winter period, heavy fog and flooding can cause road closures and/or hazardous driving conditions. These conditions are exacerbated by the lack of reliable personal transportation for many people. Even within the county, most available services are centralized in Colusa where transportation represents a major barrier for many families.

The table below summarizes key indicators of health status for pregnant women, babies, young children, and parents.

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Percentage of pregnant women entering prenatal care in the first trimester	65% in 1997 60% in 1996 63% in 1995 (Colusa County Maternal, Child, Adolescent Health [M.C.A.H.] Community Health Assessment and Local Plan)	This has been a consistent problem in the county; 1996 and 1997 rates actually represent a significant improvement over the 46-52% rates of preceding years. The state target is 90%. Contributing factors include: cultural influence, changes in the provider network for OB care, high unemployment and poverty rates, high percentage of births to women with high school or less education, and transportation barriers (since over 40% of babies are delivered out of the county).
Percentage of live born infants whose mothers received adequate prenatal care (based on the Adequacy of Prenatal Care Utilization Index)	56% over the three year period from 1995 – 1997 (County Health Status Profiles, Department of Health Services, 1999)	The 1995 – 1997 rates represent moderate improvement over previous years but still show an extremely high rate of inadequate prenatal care. By comparison, the rate for California as a whole was 67% during the period and the national target is 90%. Colusa was 52 nd out of 58 counties for this indicator.

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Low birth weight (less than 2500 grams at birth)	14 in 1997, 4.6% of all births (Colusa County M.C.A.H. Community Health Assessment and Local Plan)	The two year aggregate rate for 1996 – 1997 is 3.9%, which is significantly better than the state average of 6%.
Infant mortality (number of infant deaths occurring at less than 1 year old)	2 per year in each year from 1994 through 1997 (Colusa County M.C.A.H. Community Health Assessment and Local Plan)	The county's Child Death Review Team, which includes the MCH/Public Health Director of Nurses and the Colusa County Health Officer, has reviewed each case of infant death and has not noted any specific problems to be addressed.
Proportion of mothers who intend to exclusively breastfeed their infants at hospital discharge	40% in 1997 51% in 1996 30% in 1995 (Colusa County Maternal, Child, Adolescent Health Community Health Assessment and Local Plan)	The Healthy People 2000 objective is to increase to at least 75% the proportion of mothers who breast-feed their babies in the early post-partum period. The historical rates in Colusa County are clearly well below this target, although not far off the state average of approximately 43%.
Maternal HIV infection	0 cases reported between 1988 and 1995	
Kindergarten students needing one or more immunizations	69 in 1997, 20.6% of all kindergarten students (Center for Health Statistics, California Department of Health Services)	The county has a historically high immunization rate. It was 97% in 1996. The drop in 1997 is attributed to new Hepatitis B immunization requirements. In 1997, only 5% of children enrolled in child care centers (a total of 11 children) required follow-up for immunizations, all due to the new Hepatitis B immunization.
Anemia	13% of children enrolled in Head Start are anemic; county average is 20% (1998 Head Start Community Needs Assessment)	Blood assessments were performed for 1,514 children in the CHDP program from July 1997 – June 1998 and no significant problems with anemia were noted.

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Tobacco use	277 children reporting exposure to passive tobacco smoke in fiscal year 1997/1998 (FY 1997/98 Summary CHDP Data from Confidential Screening and Billing Forms)	Active tobacco prevention and counseling efforts exist in Colusa County. For example, in fiscal year 1997/1998, 2656 children or approximately 2/3 of school-age children had been counseled for tobacco prevention.
Substance abuse	192 persons receiving drug and/or alcohol services as of 10/1/96, 21 hospital admissions in 1996 for methamphetamine use (Center for Health Statistics, California Department of Health Services)	A 1999 survey conducted as part of the Maternal Child Adolescent Health Community Needs Assessment further identified substance abuse as a problem in Colusa County. 41% of respondents said they have been affected by alcohol abuse, 66% identified drug abuse as a major community problem, and 59% identified alcohol abuse as a major problem.

Other health care and wellness issues that have been identified:

- ?? Access to dental services for children was rated as a “very large problem or challenge” by 44% of respondents to the parent survey, and was identified as the top health care need in the provider survey. Per the 1998 Head Start Community Needs Assessment, there is only one dental office in Colusa County that provides CHDP treatment services and it is located in Arbuckle. There are only two dental offices in the county that accept Denti-Cal clients, one in Colusa and one in Arbuckle. Children needing oral surgery or Pediatric dentist care must travel 25-65 miles out of the county to Yuba City, Marysville, Woodland or Sacramento. As of March 1998, 93 children in the Head Start program have received dental screenings. Of these, 16% need immediate attention and 22% need care soon.
- ?? Inadequate use of car seats to prevent injuries to small children is a concern. The M.C.A.H. Community Health Assessment noted that many low-income families have difficulty obtaining adequate car seat restraints for their infants and children less than 4 years old. Several mothers in group meetings had acknowledged that they had received tickets from law enforcement officers for improperly restraining their children or not restraining them at all.
- ?? Language represents somewhat of a barrier for Spanish-speaking families, but recent surveys have noted the presence of bilingual health care service providers as a strength of the local health care system.

Education

There are a total of 4,375 students in grades K-12 in Colusa County, of which 1,206 are students at the five sites with K-3 classrooms. The school system consists of the Colusa Unified School District with four schools, Maxwell Unified School District in the northern end of the county with three schools, Pierce Joint Unified School District in the southern end with five schools (shared with northern Yolo County), and the Williams Unified School District with three schools. Adult education programs are available in Colusa, Williams, and Arbuckle.

With the respect to the community as a whole, the data from the 1990 census shows a relatively large number of adults with limited education. Of the 11,237 people age 18 or older, the level of educational attainment was:

Less than 9 th grade	2,213	(19.7%)
9 th to 12 th grade, no diploma	2,139	(19.0%)
High school graduate	2,810	(25.0%)
Some college, no degree	2,201	(19.6%)
Associate degree	761	(6.7%)
Bachelor's degree	839	(7.5%)
Graduate or professional degree	274	(2.4%)

In short, 38.7% of people 18 years or older have no high school diploma, and for an additional 44.6% of the county's residents who are 18 years or older, a high school diploma is their highest degree. Literacy and education issues have been noted as a moderate barrier for parents to accessing services and learning about early childhood development, health care, and parenting. Language and cultural differences serve to significantly compound this problem.

A 1998 needs assessment conducted by the Head Start program noted that families are feeling the need to have basic education opportunities and job training opportunities to better their economic status. The same study surveyed Colusa County School Administrators, who identified the following priorities and concerns:

- 1) More preschool programs and Head Starts are needed
- 2) More collaboration needed with Head Start in regard to transition to Kindergarten
- 3) More health services for children, especially dental care
- 4) More transportation options
- 5) Dealing with an increase in the number of low-income families
- 6) Need for all types of parent education

A parallel survey of Head Start staff identified concerns about children with behavior and school adjustment problems, transportation, and the need for increased education opportunities for parents as the top priority issues.

The 1998 Head Start report also contained the following note: "In the classrooms, education staff at all levels are dealing with children who are still learning English, many of whom are from monolingual Spanish speaking families. Other children may speak English but their language skills are lacking. A feeling persists that many children are receiving limited language exposure in their environment, resulting in delayed language development." Recent County Office of

Education data indicates that fully 45% of the county's children are of limited English proficiency. Improved early language and literacy development was identified as a major priority by 35% of teachers and other service providers surveyed for this report.

Economics

The table below highlights characteristics of the county in terms of economic factors.

<u>Attribute</u>	<u>Profile</u>	<u>Trends and Notes</u>
Unemployment rate	20.8% in 1998 18.3% in 1997 19.6% in 1996 (California Employment Development Department, Labor Market Information Division)	Unemployment is consistently high within the county, in part because of the seasonal nature of employment in agriculture, which accounts for around 30% of all jobs in the county. For example, the unemployment rate for January 1998 was 32.3%. The county's unemployment rate was the second highest in the entire state in 1998.
Per capita income	\$20,419 in 1996 \$19,576 in 1995	The 1996 per capita income was roughly \$4,500 less than the average for the state of California. Relating this to the target group of Proposition 10, 865 children ages 0 – 5 live in low-income households (California Child Care Portfolio, 1999).
Median household income	\$28,030 in 1995 \$24,912 in 1990	The median household income in Colusa County was significantly lower than the state level of \$36,767 in 1995. 79.4% of 1998's students at Williams Elementary School were from low-income families, even though both parents may work.
Poverty level	13.3% of the population (approximately 1,800 people) in 1990 (U.S. Census)	Colusa's rate of poverty is higher than the rate for the state as a whole (12.5%). Also, the 1990 census data showed that almost 18% of children under the age of 6 are below the poverty level. 95% of agricultural families are living at or below the poverty level

A study by the Colusa County Head Start program in 1998 identified several economic issues as major concerns. After affordable child care (the top concern), the top priority needs identified by the study were affordable rental housing, job training, employment opportunities, and affordable housing to purchase.

The September 1999 Strategic Action Plan developed by the Colusa County Planning & Building Department further highlighted the economic challenges of the county. By the year 2006, assuming population and labor growth is constant and existing businesses perform at national levels, Colusa County will need 4,071 new jobs to meet labor force demands and maintain an unemployment rate of 18%. Targeting a lower unemployment rate will require even more jobs to be created. Conversely, without new job, the number of unemployed persons will continue to rise or residents will be forced to leave the county.

Safety

One aspect of safety relates to the overall crime rate, and particularly crimes of violence. Statistically, crime rates are low in the county compared to the rest of California. The rate of violent crime per 100,000 population in Colusa County is less than half the rate for California as a whole. There were no deaths of children or youth ages 0 – 24 due to homicide during the entire period from 1989 through 1996.

However, a countywide survey conducted as part of the Maternal Child Adolescent Health Community Needs Assessment contains some interesting findings on the topic of safety.

- ?? 70% of respondents feel quite safe or extremely safe in their neighborhoods, while 29% feel slightly safe or not safe at all.
- ?? 43% feel fearful that their children/teens may be injured or killed intentionally.
- ?? When asked to identify the most serious problems in the community, the #1 concern was violence, crime and neighborhood safety, identified by 80% of the respondents. The next most significant concerns were drug abuse (66%), alcohol abuse (59%), unemployment (54%), and gang activity (51%).

Virtually no concerns about neighborhood safety, crime or non-family violence were identified in the town meetings and surveys conducted during the assessment process.

Specific safety issues that impact children and families are domestic violence and child abuse. There were 31 arrests for spousal abuse and 149 calls for law enforcement assistance related to domestic violence in 1997. These figures compare to 35 arrests and 185 calls for assistance in 1996. The 1996 and 1997 levels of arrests and calls for assistance represented 30 – 50% increases over the rates from 1990 through 1995, indicating that domestic violence may be escalating as an issue within the community. This is corroborated by a recent grant application to the Office of Child Abuse Prevention which noted that between 1994 and 1998, there was a 22% increase in domestic violence emergency room visits, a 243% increase in crisis calls to the domestic violence shelter, and a 2,650% increase in protective orders issued.

Data on child abuse is more difficult to obtain for Colusa County. The aforementioned grant application to the Office of Child Abuse Prevention indicated there has been a decrease of 59% in child abuse and neglect referrals from 1994 to 1998. However, rather than representing a true decline in the incidence of child abuse, the report states "it is hypothesized that this (decline) correlates to the decreased activity of the Inter-Agency Council, the Child Abuse Prevention Council, Multi-Disciplinary Team case staffing meetings, mandated reporter trainings, and a lack

of coordination in child abuse prevention programs and services." In other words, there may just be less *reporting* of child abuse rather than less actual abuse.

A breakdown of 1997 referrals to Child Protective Services (CPS) is:

Sexual abuse	37
Physical abuse	63
General neglect	96
Emotional abuse	10
Exploitation	4
Other	<u>105</u>
Total	315

A September 1999 CNA report indicated that 978 children in the county are at risk for abuse and/or neglect.

Child Care and Child Development

A profile of the child care situation in Colusa County provided by the 1999 California Child Care Portfolio from the California Child Care Resource & Referral Network shows a number of important factors.

Children ages 0 – 5 living in households with two employed parents or an employed single head of household	819
Average annual cost of full-time, licensed care in a center for an infant up to 24 months	\$3,847 13% of median income
Care for two children as % of median income	25%
Average salary of child care workers	\$16,140
Number of child care slots:	
?? Child care centers (note: all but 7 of the available slots are for child ages 0 – 5)	191 in 7 centers, a <u>reduction</u> of 105 slots (35%) from 1996
?? Family child care homes	382 slots in 37 homes, an increase of 4 slots (1%) from 1996
?? Total number of slots available	573

Children needing child care:

?? Ages 0 – 5	819
?? Ages 6 – 13	1,695
?? Total	2,514

Care available during non-traditional hours

None in licensed centers, available in 46% of family child care homes

Access to child care and early childhood education programs (preschools) was identified as an major issue throughout the town meetings and surveys, second only to health care access in importance. 50% of respondents to the parent survey stated that access to affordable child care was one of the biggest challenges affecting the well-being of young children. Specific barriers to child care access that were consistently identified:

- ✍✍ Not enough child care slots available in total
- ✍✍ No available child care openings in the communities where parents live or work
- ✍✍ No infant care centers exist in the county except one in Arbuckle
- ✍✍ Few or no options exist for parents who need child care in early morning or evening hours, care for sick children, or temporary / drop-in care that would allow the parents to access other services
- ✍✍ The cost of care is prohibitive for many parents who do not qualify for subsidies or programs like Head Start

A study by the Colusa County Head Start program in 1998 identified affordable child care as the greatest need for families participating in this program. Specific needs identified by parents in this study were: (1) more subsidized child care funds for the "working poor" families; (2) more child care providers with flexible hours for parents who work in the field; (3) child care centers for all different ages; and (4) after-school care. The 1999 California Child Care Portfolio report also noted a problem with finding seasonal child care for parents who are working in agricultural jobs, as many child care providers are unable to make a living from such irregular work.

In the recent town meetings and surveys, a strong interest was expressed by parents and providers alike in expanding the number of preschools in the county. For children age 3-5 in particular, preschools are viewed as an excellent means of addressing early childhood education needs in a safe and healthy environment that also meets the child care needs of parents.

A 1999 survey conducted by the Colusa Local Child Care Planning Council provides an excellent profile of other child care issues within the county affecting young children. Outlined below are selected findings, based on 620 responses to the survey of which 286 have children in the 0-4 age range.

- ?? Key factors in choosing a child care provider were proximity of the child care provider to the parent (39%), willingness of providers to discuss concerns with parents (30%), licensing and CPR training status of providers (30%), and the presence of learning activities (27%).

- ?? Of those responding as to whether the cost of their child care was affordable, twice as many people feel their child care is affordable as those that felt it is not affordable. Nonetheless, 20% of all respondents indicated that their cost of child care is not affordable. Only 12% of the respondents have their child care subsidized, while 37% of the respondents make less than \$30,000 per year.
- ?? Overall, relatively few respondents are dissatisfied with their child care services. Between 7 to 20% of respondents stated that they were dissatisfied depending on the care setting (day care home, Head Start, private preschool, etc.) while a majority of respondents indicated they are very satisfied.

Child development as a whole clearly requires effective parenting. In a 1999 countywide survey conducted as part of the Maternal Child Adolescent Health Community Needs Assessment, 51% of respondents indicated they would like more information about parenting. This was corroborated by the parent and provider surveys conducted for this report, where 43% of parents noted a strong need for more parenting skills / education and 40% of providers identified the need for more parent education as a top priority. The 1998 Head Start program surveyed parents for their interest in parent education topics; the topics of greatest interest were (1) discipline ideas; (2) child development; (3) parenting skills; (4) nutrition; and (5) budget strategies.

Another child development resource is the Head Start program. This program, which provides a positive preschool experience for children ages 3 and 4 in low-income families, is currently funded through the Colusa County Office of Education to serve 121 children. As of March 1999, there are 45 income eligible three and four year olds on the waiting list and 75 additional applications yet to be taken and evaluated. Most of the children served by Head Start (90) are served through two classrooms in Colusa, two classrooms in Arbuckle, and one classroom in Williams. The Home Base option serves 21 families, primarily in the smaller towns of Grimes and Maxwell. An additional Home Base site is being added to serve 10 more families in the outlying communities around Williams.

Culturally Unique Issues

The 1990 U.S. Census noted that 17% of the county's population or roughly half of the total Hispanic population at that time spoke limited or no English. If this ratio is still valid today, it is estimated that between 20 – 25% of the current population of the county speaks little or no English given the overall rise in the number of Hispanic/Latino persons in the county. Over a third of respondents to the parent survey conducted for this assessment indicated that language issues represent one of the greatest challenges they face as parents.

The 1998 Head Start Community Needs Assessment report noted a cultural barrier to access to educational services, stating "many Hispanic husbands are still a little uncomfortable with their wives expanding their education and employment opportunities."

The Native American population in Colusa County is growing faster than the rest of the state, even though the numbers remain comparatively small as percentage of the total population. The local Indian Reservation has expanded its housing on the reservation, is currently in the process of opening a dialysis unit, and has plans for an on-site day care and health clinic. The bingo / gaming business has grown and may help support plans for medical and child care facilities.

Recreation

The county contains twenty shaded parks, swimming pools, softball fields and soccer fields that are open to the public at little or no cost. These are important resources for outdoor recreation for children of all ages. Community swimming pools are available in Colusa, Williams, Maxwell and Arbuckle.

The town meetings and parent survey conducted for this report both indicated a strong interest by parents in enhancing the recreational options for young children and families. A number of parents expressed a desire for more playgrounds and play equipment (especially for toddlers), safer playgrounds, and support for organized play groups. Interest in park and recreation enhancements was broad-based across all communities but particularly strong in Colusa and Grimes.

Recreation for children varies in availability depending on the size of the community. Little League, Pee Wee Football and Soccer are available to most children in the county. However, the expense involved and transportation may be a barrier to some. Other organizations such as 4-H, Girl Scouts and Boy Scouts are available but not typically accessed by low income or monolingual Hispanic families. Few youth recreational programs extend to children age 0 – 5.

Transportation

Transportation represents a significant challenge for many people seeking to access services within the county. The majority of residents need to travel anywhere from 10 to 50 miles to access health services and other services. Transportation was labeled as one of the primary challenges by 36% of parents responding to the survey conducted for this report. In the provider survey, lack of transportation was noted as the biggest barrier to accessing health care services (67% of respondents listed transportation as one of the top three barriers) as well as a major barrier to accessing child care, parent education, and other children and family services.

Public transportation is limited to five county buses between communities on a Dial-a-Ride basis, without fixed routes and predictable times, and is limited to certain times and days. Colusa Transit buses run ten times a day to Williams and four times a day to Arbuckle. Another route runs four times a day to Grimes and College City. These routes only run on Monday through Friday, starting in Colusa at 7:30 a.m. and starting final runs back to Colusa at 4:00 p.m. Buses also run to Maxwell and Princeton twice a day on Tuesdays and Thursdays and to Stonyford every other Thursday.

The Colusa County Public Transit does provide services for persons with disabilities. There is also a private taxi company that provides transportation at a cost, but only on evenings, weekends and holidays when bus service is not available. The cab service does not travel to any in-county rural destinations. Public transportation is not available to Yuba City, Willows, Woodland or any other town outside of Colusa County.

Surveys of parents, staff, and school administrators conducted by the Head Start program in 1998 consistently identified improved transportation as a major need within the county. The same report noted that many families have one car, and the car is often unreliable such that families are not comfortable driving long distances (even 20 miles from Arbuckle into Colusa for services). Insurance requirements hamper some of the potential drivers. This situation is confirmed by a December 1997 survey conducted of persons receiving Aid to Families with Dependent Children (AFDC) that revealed that 38% of the AFDC population had no automobile available to them.

Special Needs and Other Family Issues

“Special needs” refers to persons who have a disabling condition such as autism, deaf-blindness, hearing impairments, mental retardation, orthopedic impairment, learning disabilities, traumatic brain injury or serious emotional disturbance. As of March 29, 2000, there were 53 children age 0 – 5 identified with special needs in Colusa County. The breakdown by type of disability is:

Speech handicaps	36
Orthopedically impaired	3
Visually impaired	1
Hard of hearing	4
Other health impaired	3
Learning disabled	1
Mentally retarded	2
Multi-handicapped	3

The Head Start program is the main preschool program serving children with disabilities. Eight children with special needs are currently served by Head Start. The Colusa County Office of Education Special Education Department also provides speech and language services to another 36 preschoolers in the county.

In the 1998/99 school year, 11 children ages 0-3 years were served by the Special Education Infant Program. Of the 11, 2 children are Orthopedically Impaired, 1 child is Visually Impaired, 1 child is Mentally Retarded, 1 child has severe Speech and Language handicap, 3 have Speech only needs, and 1 is multi-handicapped.

The 1999 Head Start report also noted that the county periodically has difficulty recruiting Speech and Language Therapists, Adaptive Physical Education teachers and School Psychologists.

During county fiscal year 1997/1998, an average of 35 children per month were placed in foster care. Average monthly foster care placements have ranged between 26 and 37 during the period 1995 – 1998.

4. COMMUNITY RESOURCES

This section contains a summary of programs, services, and other community assets that currently or potentially could link to the needs of young children and families that are identified in section 3 of the report.

Governmental-based Services

Most of the social programs and human services available within the county are operated by the County of Colusa. A few additional services are offered by the two incorporated cities, Colusa and Williams, mainly in the area of public safety and recreation. The table below provides a summary of existing government-based services and agencies that directly or indirectly benefit children in the prenatal to age five category.

Program	Description	Current Service Levels
<u>HEALTH</u>		
Child Health and Disability Prevention (CHDP)	Provides physicals, immunizations and other health and dental services for children up through completion of high school. Income guidelines exist to determine eligibility for CHDP services.	A total of 2,821 children or 66% of all school-age children were served by CHDP during the period July 1997 – June 1998.
Maternal, Child, Adolescent Health – includes ?? Perinatal Outreach & Education (POE) ?? Perinatal Services	Addresses a diverse range of health issues including infant and child mortality, births to teens, access and early entry to prenatal care, and specialty care services for children with special health care needs. The POE program provides home visits during pregnancy, while Perinatal Services promotes systems-level networking and collaboration.	Data not yet available.
Medi-Cal	Health, dental and vision care insurance designed to increase access to care and lower the costs of care for low-income persons. Income limits and other tests must be met to be eligible.	During fiscal year 1998/1999, 3382 people or 18.2% of the county's population were eligible for Medi-Cal. Of these, an average of 1800 people or 53% of the eligible population were enrolled in Medi-Cal.

Program	Description	Current Service Levels
Healthy Families	Another health insurance program, separate from Medi-Cal, designed to increase access to care and lower the costs of care for low-income persons. Income guidelines must be met to be eligible but in general these income limits are higher than those for Medi-Cal. An outreach coordinator is on staff to promote enrollment in the program.	Service levels and number of eligible people within Colusa County cannot be determined at this time because the contractor for this program, Del Norte Clinic, has Colusa County's data aggregated together with multiple other counties and cannot break out the data for Colusa County.
California Children's Services	Offers health coverage for children meeting specific medical criteria. The families must also meet income guidelines to qualify.	Data not yet available.
Healthy Start	Provides a family service center in Arbuckle for a variety of school-linked health and human services	Data not yet available.
Colusa County Department of Behavioral Health Services	Provides individual, child, marital, family and group counseling on sliding fee scale basis. Medi-Cal is accepted. Also operates a perinatal program to assist pregnant women with substance abuse problems.	Data not yet available.
Tobacco Education	Coordinates education and intervention efforts designed to reduce tobacco use in schools and among the public at large. Preschool age children are targeted through visits to Head Start programs, preschools, child care providers and other sites.	In fiscal year 1997/1998, 2,656 children or approximately 2/3 of school-age children had been counseled for tobacco prevention.
<u>EDUCATION</u>		
Colusa County Public Schools	Four school districts within Colusa County combine to provide comprehensive education for kindergarten through 12 th grade plus adult education programs.	The kindergarten through 12 th grade student population was 4,310 in October 1997. 1206 of these students were in kindergarten – 3 rd grade classrooms.
Office of Education Infant Program	Provides early intervention for at-risk babies such as those born prematurely or identified with developmental disabilities.	Data not yet available.

Program	Description	Current Service Levels
Migrant Education	Provides supplemental educational and supportive services for eligible children who have moved across state or school district lines with a parent or guardian who is seeking temporary or seasonal agriculture work.	A total of 413 children age 0 – 5 were served by Migrant Education in 1999. 74 of these children, all age 3-5, participated in the Early Childhood Education Home-Based Program.
Colusa County Libraries	Main library in Colusa with branch libraries in Williams, Maxwell, Arbuckle, Grimes, Stonyford and Princeton offering books, audio / video, literacy education programs and computer access. Hours are limited in towns other than Colusa.	Data not yet available.
Yuba College	Provides a number of educational programs that enhance literacy and skills of parents.	Data not yet available.
<u>ECONOMICS AND HOUSING</u>		
Women, Infants and Children	Provide food coupons and other forms of direct assistance with basic needs for families with children.	Serves 609 women and infants in Colusa County. 80% are Spanish speakers, 20% are English speakers.
CalWORKs	Provides cash assistance to income-eligible families in need and operates a welfare-to-work program designed to promote economic self-sufficiency among people receiving public assistance.	245 people participated in fiscal year 1998/1999. 211 families were receiving cash assistance in July 1999.
Food Stamps	Provides stamps to income-eligible persons that can be used at participating grocery stores to purchase food.	In November 1999, there were 251 food stamp cases covering 623 people. This was a significant decline from the May 1999 levels of 333 cases and 946 people benefiting from food stamps.
Employment Development Department	Provides job placement services and pays unemployment insurance to eligible recipients	Data not yet available.

Program	Description	Current Service Levels
Yuba College Career Resource Center	Provides job training and placement services as funded through the Job Training Partnership Act (JTPA). A variety of support services, such as child care, are provided to persons going through training programs.	250 people participated in job training in 1999. Approximately \$80,000 was spent on child care for the benefit of these persons.
Campaign for Human Development	Provides job search and training services.	Data not yet available.
Section 8 Housing	Provides support for development of low-income housing and subsidies to assist eligible individuals and families with the cost of monthly rent for housing meeting specific program criteria.	No services being provided, as no Section 8 eligible housing currently exists in Colusa County.
Migrant Housing	New complex in Williams to provide housing to migrant farm workers and their families.	
<u>SAFETY</u>		
Child Protective Services	Investigates allegations of child abuse and neglect, obtains temporary custody of children when necessary for their protection.	There were 206 referrals to Child Protective Services in 1999.
Law Enforcement (Colusa County Sheriff's Department, Colusa Police Department, Williams Police Department, California Highway Patrol)	Provides public safety services including patrol, response to calls for assistance, investigation of crimes, jail operation, promotion of neighborhood watch programs, child fingerprint program, enforcement of child safety restraint laws, and various other services.	Data not yet available.
Victim Witness Assistance	Program operated by the Colusa County Probation Department to provide assistance to victims and witnesses of crimes.	Data not yet available.
Coroner's Office	Investigates the cause of deaths in the county, including newborn and infant deaths.	Data not yet available.

Program	Description	Current Service Levels
<u>CHILD CARE AND CHILD DEVELOPMENT</u>		
Local Child Care Planning Council	State-mandated group responsible for assessing child care needs in the community and planning and conducting activities that promote the development of quality child care in the county.	The Council is not a direct service provider so no service levels can be reported. It is, however, an integral part of the child care network within the county.
Head Start	Comprehensive, developmentally appropriate program for income-eligible children age 4 and 5. 10% of enrollment is reserved for children with special needs.	Data not yet available.
General Child Care Center	Offers child care services in a preschool center setting for children age 3 to 5 from families meeting income eligibility guidelines. Located in Colusa.	Data not yet available.
Child Care Resource and Referral	Information service designed to help parents find child care and to assist licensed child care providers. Services are available to all parents and child care providers in the county.	Data not yet available.
Childcare for Agriculture Related Employees	Day care services for children between ages of six weeks and 13 years coming from eligible families who earn at least 50% of their income from agriculture-related work in the county. Developmental activities, meals, and health and dental assessments are provided.	Data not yet available.
Subsidized Child Care	Programs that help subsidize the cost of child care for families that meet income and need requirements.	1356 families were eligible for subsidized child care in September 1999. Conversely, there were 2536 families that were <u>not</u> eligible.

Program	Description	Current Service Levels
The Parent Connection	Assessment of family needs, parenting classes by agency referral, and information and resource materials on effective parenting.	Four 30-hour parenting education series are conducted annually in both English and Spanish. 40 adults received education from July 1998 – June 1999. This figure is low due to not having a Spanish-speaking teacher for a period; normal service levels are 70 per year. Information, referral and advocacy were provided for 21 families. Counseling was provided for 8 adults and 8 children.
Healthy Family	Program funded through a grant from the Office for Child Abuse Prevention (OCAP) to provide home visiting to at-risk families.	Data not yet available.
CalSAFE (formerly called School-Age Parent and Infant Development Program or SAPID)	Offers classes in parenting and child care, along with a child care center, for students who are also parents or who will become parents before the end of their high school career.	Data not yet available.
<u>RECREATION</u>		
Colusa County Parks and Recreation Department, City of Colusa Public Works Administration	Operates public parks, playgrounds, and pools. Provides after school and summer recreation programs for youth and families.	Data not yet available.
<u>TRANSPORTATION</u>		
Colusa County Transit	Operates five buses providing public transportation within the county during weekdays. Daily service runs between Colusa and the towns of Williams, Arbuckle and Grimes. Limited service also runs to Maxwell, Princeton and Stonyford.	Ridership for May 1998 was 5,034, for an average of 252 rides per day. Ridership has declined over 25% since a 25 cent fare increase was recently implemented.
<u>SPECIAL NEEDS AND OTHER FAMILY ISSUES</u>		
Family Law Advocates	Program that assists parents and guardians with a broad range of family law issues including adoption, custody, and foster care.	Data not yet available.

Program	Description	Current Service Levels
Special Education	Provides speech and language therapy, early education services, physical therapy, and assistance with other service needs to infants, toddlers and preschool children having a disabling condition such as autism, hearing impairments, mental retardation, orthopedic impairment, learning disabilities, traumatic brain injury and serious emotional disturbance.	As of March 29, 2000, the Colusa County Special Education Local Plan Area was providing services to 53 children age 0 – 5. The breakdown by location is: <div style="margin-left: 40px;"> Colusa Unified 28 Maxwell Unified 6 Pierce Unified 9 Williams Unified 10 </div>

Private Sector Services

There are no nonprofit organizations located within Colusa County that have a primary or secondary purpose of providing services to young children and their families. Available private sector services based within the county are almost exclusively related to health care and child care services. Additional services are available in adjacent counties but require travel of 30 miles or more to towns such as Yuba City, Willows, and Woodland.

Non-governmental services located within the county that address needs of young children and their families are listed below, by type of service.

Basic needs:

- ?? A food closet is located on Oak Street in Colusa, open Wednesdays and Fridays, to provide free food to families in need.

Health care:

- ?? Colusa Community Hospital, Colusa – In addition to the main hospital campus in Colusa, nurse practitioner satellite offices are located in Colusa and Williams with a third office now being established in Arbuckle.
- ?? Del Norte Clinic, Inc. / Colusa Family Health Center, Colusa – The agency accepts Medi-Cal and Healthy Families coverage. In addition to primary care services, a perinatal program and nutritionist are available to WIC-eligible women.
- ?? Colusa Home Health – Provides 24-hour home visits for newborns. Doctor's orders are required to initiate a visit. Insurance is also required; Medi-Cal is accepted.
- ?? North Valley Family Physicians, Colusa
- ?? UC Davis Medical Group, Colusa
- ?? Dr. Highman and his Physicians Assistant, Colusa
- ?? Charles McCarl, MD, Williams
- ?? Cortina Indian Rancheria Tribal Health Program

Dental care:

- ?? Colusa Family Dentistry, a part of Del Norte Clinic, Inc., Colusa
- ?? Roger Ashworth, DDS, Arbuckle
- ?? Thomas Gibson, DDS, Colusa
- ?? Clay Gidel, DDS, Williams
- ?? Wayne Wilson, DDS, Williams

Safety:

- ?? Casa de Esperanza – Nonprofit organization based in Yuba City but providing active outreach to Colusa for services to address domestic violence, sexual assault, and child assault prevention. In 1998, this agency responded to 137 crisis calls, sheltered 79 women and children, and assisted with 55 protective orders for residents of Colusa County.

Child care:

- ?? Four private child care centers exist (in addition to the three centers operated by county programs) – two in Colusa, one in Arbuckle, and one in Williams.
- ?? 47 private family child care homes – 21 in Colusa, 9 in Arbuckle, 4 in Maxwell and 13 in Williams.

Transportation:

- ?? Colusa County Cab Company – Operates two passenger vehicles. Through a contract with Colusa Transit, transportation is provided on evenings, weekends and holidays between the main population centers.

Provider and Civic Groups

Colusa County benefits from a number of councils, task forces and other on-going work groups made up of social service professionals, educators, and other interested members of the community. These groups provide a forum to share information, coordinate efforts, sponsor special events, and advocate for positive action on various issues. Groups meeting regularly that are involved with issues affecting young children and their families include:

- Inter-Agency Children's Council
- Child Abuse Prevention Council
- Breastfeeding Task Force
- Teen Pregnancy Prevention Coalition
- Domestic Violence Task Force
- Colusa County Children and Families Commission

Several parent groups are active in the county that provide support for parents and advocacy for the needs of children. The mom's group in Grimes is particularly active. Parent-Teacher Associations are also operating in each of the four school districts.

In addition, several civic organizations exist in the county. Civic, social and fraternal organizations include Rotary, Soroptomists and the Masonic Lodge. These organizations are not focused on addressing needs of children and families per se, but they provide forms of community service and may be a resource to assist with developing and implementing solutions for families.

Other Community Resources and Assets

The faith community is active in Colusa County, with 23 churches identified to date in the county. These churches are concentrated in the four largest towns with 11 in Colusa, 6 in Williams, 4 in Maxwell and 4 in Arbuckle. Many of these churches offer a range of programs and services for children and families including child care, youth programs, counseling, and food and clothing assistance. In Williams, a Ministerial Committee comprised of representatives of local churches meets regularly.

The Cortina Indian Rancheria is a strong resource for persons of Native American descent. Programs and services include the Tribal Health Program, assistance with health care service applications and appointments, scheduling van transportation, health education classes, child care with funding for several in-home providers, and a child care resource library.

Resources of notes that are located outside of the county but which are available to provide support to Colusa County residents and organizations include:

- ?? Literacy Resource Center, 420-B Laurel Street, Willows – Regional resource center providing contacts and materials to assist individual tutors and literacy programs in the area.
- ?? A Woman's Friend – Nonprofit organization located in Marysville that provides crisis intervention, pregnancy testing, free medical exams by a physician, clothes, and other support services for women.
- ?? Catholic Social Services – Site in Chico offers a broad range of services such as assistance with food, clothing and housing needs. This is part of a larger national operation that could be approached about providing outreach and support in Colusa County.

Although not a local community resource, it is important to note the assistance available from the statewide network of Children and Families Commissions. The State Commission has developed numerous materials and initiated media campaigns that benefit Colusa County, and will be investing millions of additional dollars each year in new projects that can directly or indirectly help the county. The Proposition 10 Technical Assistance Center is a source for free access to highly qualified consultants and other materials to help with planning, program development, evaluation, and various other issues. Investments made by other County Children and Families Commissions can often be accessed and leveraged by Colusa County.

Strengths of Existing Services and Resources

The survey that was issued to service providers and professionals asked respondents to identify the primary strengths of the existing system of services within each of four categories: health care, child care, early childhood development, and parenting support. The primary strengths identified from the survey are summarized below. An item needed to be identified by at least 5 respondents (1 out of every 8 respondents) in order to be included here.

Health care:

- ?? Availability of bilingual providers
- ?? Quality providers, small town caring, able to know your doctor
- ?? Presence of a local hospital
- ?? Services offered by the Colusa County Public Health Department, including the immunization clinics that help many children

Child care:

- ?? Caring providers, most child care that is available is quality care
- ?? Assistance available through Children's Services such as resource and referral assistance, child care subsidies, and other assistance
- ?? Availability and utilization of training by child care providers

Early childhood development:

- ?? The Head Start program is very effective and a model for integrated services in a preschool format
- ?? High level of dedication and caring among early childhood development providers, good quality of services
- ?? Migrant Center and CARE programs

Parent education and support: No single item was identified by at least five people as a strength. The strength indicated most frequently, by four respondents, is a feeling that a wide variety of parenting support programs are available and these programs are improving in their ability to reach parents through linkages with other programs like Head Start.

5. ANALYSIS OF GAPS

After analyzing all of the information gathered about community needs and available resources to support the needs of young children and their families, a core group of “gaps” became readily apparent. Gaps represent areas where either an identified need is not being met at all or the existing level of resources is significantly less than the level of need that has been identified. This section summarizes the major gaps identified in the assessment process. Gaps are presented in two parts. First, gaps associated with the availability or functioning of individual services are outlined. Second, gaps related to the overall system of services are listed.

Gaps in Individual Service Categories

A number of areas have already been identified in this report where the existing level of services is not sufficient to meet the demand from families. The most significant gaps are summarized below. Note that this does not represent a complete list of issues or community needs to be addressed, but rather only focuses on gaps between the demand for services and the corresponding supply of services.

- ✍✍ Health care providers: Needs have been identified for more primary care physicians and more access to specialists (particularly pediatricians and obstetricians/gynecologists).
- ✍✍ Health care facilities: A need exists for urgent care clinics or other means of accessing care for immediate health needs during after-hour and weekend periods when other health care facilities are closed.
- ✍✍ Dental care for children: The number of dentists who accept children, and especially those who accept Medi-Cal or Healthy Families coverage and have bilingual capabilities in their office, is extremely low and not close to meeting the level of need.
- ✍✍ Infant care: Only one infant care center exists in the county and it is in Arbuckle, inaccessible to most parents in the county.
- ✍✍ General child care capacity: The total number of child care slots is far below the number that are needed, whether viewing just the needs of the 0 – 5 age group or all children.
- ✍✍ Child care flexibility: Virtually all child care services that are available are limited to standard hours, such as 7:30 a.m. – 5:30 p.m. Very few options exist for off-hour child care and almost no options exist for drop-in care or care for sick children.
- ✍✍ Preschools / early childhood education facilities: The number and location of preschools is much less than the need for quality early childhood education programs for children age 3 – 5. Most existing preschools, such as Head Start, are limited to families meeting income guidelines and exclude the majority of the population of the county.

- ✍✍ Parent education services: The number of parents receiving parenting classes each year is far below the potential number of parents, especially given the high level of interest in parenting skill development that has been expressed among respondents to multiple recent surveys.
- ✍✍ Transportation: The overall availability of transportation and quality of service is far below the need.
- ✍✍ Parks and recreation programs and facilities: The existing parks and recreation facilities and programs do not appear to be meeting the needs of families with young children in terms of the number of areas, equipment provided, or access to activities.

A positive note is that in each instance, some level of services are already available. This provides a base of infrastructure to build upon rather than having to develop entire new systems of services from the ground up.

Gaps in the Overall Service Delivery System

Several issues should be highlighted that speak to the completeness and effectiveness of the overall system of services targeted to (or serving) young children and their families:

- ✍✍ Except for health care and child care, virtually all services that exist in Colusa County are operated by the County itself. There are no social service nonprofit organizations and no community foundations within the county. This is not a problem per se but creates a concern over excess reliance on state and federal funding, county budget decisions, and other factors.
- ✍✍ Many services are centralized in the City of Colusa. Limited services are available in Williams and Arbuckle, and virtually no services are available in other communities such as Maxwell, Grimes, Princeton and Stonyford, even on an occasional outreach basis. Given the difficulties with transportation, child care and other needs, the current structure effectively cuts off access to services for many families in all but emergency situations.
- ✍✍ Most existing services are governed by state and federal regulations that limit their access to low-income persons or persons who meet other types of strict eligibility guidelines. Families that do not meet these guidelines and yet do not have large incomes are often unable to access many types of services. Lack of eligibility was rated as the #1 barrier to accessing services in the parent survey, with 67% of respondents indicating that eligibility was a “very large barrier.”
- ✍✍ The cost of services was rated as the second largest barrier to accessing available services. 54% of respondents to the parent survey identified cost as a “very large barrier”, and in the provider survey cost was consistently rated as the #1 or #2 barrier for accessing health care, child care, and early childhood development services.

☞ People need more information about services that are available and assistance in gaining access to those services. In the survey of parents conducted for this assessment, for example, the lack of information was identified as a “very large barrier” by 51% of respondents. This was the third greatest barrier behind eligibility for services and cost. The parent survey further supported the existence of information gaps by the relatively low percentages of parents that are aware of various services. For example, only 56% of respondents were aware of the Healthy Families program, 49% were aware of parent education classes, 44% were aware of the presence of child care subsidies, and 20% knew about CalWORKs.

☞ Many parents have expressed frustration and difficulty with the process of applying for available services. 47% of respondents to the parent survey rated challenges with application processes as a very large barrier to accessing services.

In closing, a series of meetings involving a broad range of public agencies, councils and task forces between November 1999 and January 2000 identified a number of important factors to consider when planning improvements to early childhood development services:

1. Existing collaborative bodies lack structure and coordination;
2. Existing agencies lack the time and staff resources to provide consistent, continuing coordination of agency and collaboratives' activities;
3. Existing parent education programs are under-utilized;
4. Existing services for families and children are fragmented, not seamless, nor do they provide for a system of care;
5. Previous needs assessments may not adequately reflect community members' perceptions of their communities' needs;
6. Previous needs assessments do not result in planned, coordinated responses or program development; and
7. Child abuse and neglect is under-reported by agencies and schools.

A fundamental outcome sought by performing this assessment is to serve as a basis for bringing together the many service providers, parent groups, schools and other members of the community to create a comprehensive, countywide plan for an integrated system of services that truly meets the needs of young children and parents.

APPENDIX A: DATA SOURCES USED IN THE REPORT

Listed below are various sources of information that were reviewed and incorporated into this report. For each information source, references are provided to indicate where the data was used in this report.

California Child Care Portfolio. California Child Care Resource & Referral Network, 1999.
Provided information in section 3 for Economics and Child Care and Child Development.

California State University, Chico. Colusa County Economic and Demographic Profile, 1999.
Provided information in section 2 for the Population Profile plus in section 3 for Economics.

Colusa Community Hospital. Primary Care Health Professional Shortage Area Application for Colusa County, California. January 16, 1996.
Provided information in section 2 for the Population Profile related to the migrant farm labor population, plus in section 3 for Health.

Colusa County Office of Education, Children's Services, Local Child Care Planning Council, Child Care and Community Needs Assessment, July 1999.
Provided information in section 2 for both the Area Description and Population Profile, plus in section 3 for Education, Economics, Child Care and Child Development, Recreation, and Transportation.

Colusa County Office of Education Head Start Community Needs Assessment, 1998.
Provided information in section 3 for Health, Education, Economics, Child Care and Child Development, Recreation, and Transportation.

Colusa County Office of Education. Primary Intervention Program, Early Mental Health Initiative Grant Proposal, 1999.
Provided information in section 3 for Education, and Economics.

Colusa County Maternal, Child, Adolescent Health (M.C.A.H.) Community Health Assessment and Local Plan, 1999 – 2004.
Provided information in section 2 for both the Area Description and Population Profile, plus in section 3 for Health, Safety, Child Care and Child Development, and Transportation.

Colusa County Public Schools Directory, 1999-2000.
Provided information in section 3 for Education.

Colusa County Strategic Plan. Community Presentation by David Esparza Consulting, November 18, 1996.
Provided information in section 2 for the Population Profile plus in section 3 for Safety.

Community Based Family Resource & Support (CBFRS) Grant Application, August 1999.
Provided information in section 3 for Education and Transportation.

County Health Status Profiles. Department of Health Services and California Conference of Local Health Officers. 1998, 1997, 1996, and 1995 editions.

Provided information in section 3 for Health.

County of Colusa. Strategic Action Plan (SAP): A Comprehensive Economic Development Strategy. September 1999.

Provided information in section 3 for Economics, and Transportation.

Health Data Summaries for California Counties. Center for Health Statistics, California Department of Health Services. 1998.

Provided information in section 2 for the Population Profile plus in section 3 for Health and Economics.

Small County Initiative (SCI) Grant Application to the Office of Child Abuse Prevention (OCAP), January 2000.

Provided information in section 3 for Safety and in section 5, Analysis of Gaps.

In addition to the above information sources, numerous monthly, quarterly and/or annual service reports were provided by County Departments that contained valuable data on individual programs. Program level service reports were utilized from the Child Health and Disability Prevention (CHDP), Maternal Child & Adolescent Health (MCAH), CalWORKs, Special Education, Head Start, Healthy Start, Parent Education, Migrant Education, Medi-Cal, Primary Intervention Program (PIP), Child Protective Services (CPS), and Child Abuse Prevention, Intervention and Treatment (CAPIT) programs.

APPENDIX B: TOWN MEETING RESULTS

This appendix contains the results of town meetings conducted throughout Colusa County to gather information directly from parents of young children and other interested community members regarding the needs of young children and parents, barriers to service, and the types of services that are desired. Five town meetings were held:

Colusa	February 15, 2000	7 attendees
Maxwell	February 16, 2000	23 attendees
Arbuckle	February 23, 2000	9 attendees
Williams	February 24, 2000	5 attendees
Grimes	April 4, 2000	9 attendees
Total		53 attendees

Common themes that were identified in at least three out of the five town meetings are summarized below.

Needs of young children and their parents:

- ?? More child care services in general, with a particular need for infant care and more flexible care options (such as extended hours)
- ?? Access to health care and dental services
- ?? Parks and recreation facilities for young children and their families
- ?? Parenting education
- ?? Resource library with materials for both children and parents
- ?? Better prenatal care and education for pregnant women

Barriers to accessing services:

- ?? Transportation is a barrier on many levels – insufficient hours of service, routes are limited, existing service is unreliable, services and schedules are not available in Spanish, and other challenges exist
- ?? Language is a major barrier for persons who speak limited or no English
- ?? Insufficient awareness exists regarding available services
- ?? Cultural differences limit access to services

Characteristics desired in services in the future:

- ?? Local, community-based services (as opposed to centralized services in one part of the county like Colusa)
- ?? Culturally sensitive services
- ?? Home visitation efforts and other outreach that bring services to families

Beyond these consistent messages, numerous other ideas and excellent suggestions were gathered. The tables in the remainder of the document contain the complete notes that were recorded during the facilitated group discussions held in each town meeting.

Colusa

Children's Needs	<ul style="list-style-type: none"> ?? Infant care is lacking (none exists) ?? Day care in general is lacking ?? Not enough prenatal care ?? Playgrounds for small children, safe places to play ?? Centers / groups (e.g. playgroups) for young children ?? Dental care ?? Preschools: few choices exist, not many spaces are available, preschools that do exist are expensive ?? Drop-in and short-term child care ?? Care for sick children
Parent's Needs	<ul style="list-style-type: none"> ?? Education on parenting skills and nutrition ?? Drug and alcohol abuse treatment ?? Housing: not enough quality units exist, units are too expensive ?? Transportation: not available, hours are limited, not available in languages other than English, expensive ?? Ways to overcome language barriers
Ideal Services	<ul style="list-style-type: none"> ?? Lending library – toys, videos, games ?? Picture books / packets to show the importance of reading to children, available wherever children are born ?? Training / workshops on early childhood development issues ?? Transportation to O.B. physicians – allow choice of physicians ?? Services to bridge language barriers ?? Infant center – provide a location / building to offer care, information, playground ?? Neighborhood-based services – cut down on travel needed to access services, increase comfort with using services ?? More buses and taxi options, to include: <ul style="list-style-type: none"> Longer hours, e.g. 8:00 a.m. – 6:30 p.m. More frequent Go on medical appointments Service within communities as well as between communities Set schedule Caring transit employees Bi-lingual ?? Mobile units to bring services to each community ?? Child care services that include: <ul style="list-style-type: none"> More providers and training Assist with up-front costs of getting a center started Quality care: education, safe places to play Infant day care ?? More parenting classes + classes that are connected to schools and child care centers ?? Home visits to all homes with newborns ?? Teach about brain development in a simple way

Maxwell	
Children's Needs	<ul style="list-style-type: none"> ?? Local health clinic ?? Child care center – infants to school age ?? Head Start Classroom ?? Home Base Head Start daily – not weekly ?? More services for health appointments, local health care ?? Vision and dental care ?? Local park with adequate play equipment for small children ?? Pediatric specialist ?? Language development
Parent's Needs	<ul style="list-style-type: none"> ?? Local store accepting WIC ?? Better school bus service ?? Transportation – transit runs 2 days/week only ?? ESL classes to be able to help children with homework ?? More awareness of services available ?? Lending library with resources for parents ?? Counseling services ?? Nutrition/health classes ?? Use the radio, church for communication ?? Low income housing for sale ?? Nursing services to home of new moms ?? Better services when applying for Medi-cal ?? More O.B. doctors for parents to choose ?? Large food store in the county ?? Providing love and affection
Issues/Concerns/Barriers	<ul style="list-style-type: none"> ?? Transportation ?? Local clinic ?? Local child care center ?? Licensing problems for day care ?? Lack of money for pre-schools ?? Parents not aware of available services ?? Day care providers can't afford to hire additional help in order to expand available space
Ideal Services	<ul style="list-style-type: none"> ?? Local pre-school + expanded Head Start program, with characteristics of day care / pre-schools to include: <ul style="list-style-type: none"> Bi-lingual Coop option to promote parental involvement Good curriculum, prepare for kindergarten Properly staffed Incentives / subsidies for providers Local (in Maxwell) Available 6:00 a.m. – 6:00 p.m. Meals provided Infant care available ?? Help for day care providers

Maxwell

Ideal Services (continued)

- ?? Parenting classes, with characteristics that include
 - Local
 - Bi-lingual
 - Ways to convince people they need it or incentives to get parents to attend
 - Topics: nutrition, hygiene, nurturing, positive discipline, how to interact / talk / read with child, how to teach children, modeling, understanding of child development stages
 - Small group, non-threatening and/or one-on-one via home visits
 - Available while pregnant
 - For mothers, available while kids are at school and child care is available
 - Good referral system – ways to get parents linked to classes and home visits
- ?? Training so that more local people can provide parenting classes
- ?? Mobile services – bring pediatricians, dentists to Maxwell
- ?? Transportation: characteristics should include
 - Have a set schedule
 - Reliable (runs no matter what)
 - Bi-lingual staff and schedules
 - Can be limited to certain days and times
- ?? In general, services available on a more equitable basis throughout the county

<i>Williams</i>	
Children's Needs	<ul style="list-style-type: none"> ?? Transportation ?? Child care center – 0-5 years ?? Recreation center for children with games and equipment, adequate supervision ?? Psychologist ?? Clinic ?? Medical help/assistance ?? Longer and more adequate medical exam visits ?? Better equipped child care centers, with better personnel (i.e., Head Start)
Parent's Needs	<ul style="list-style-type: none"> ?? Support group for single moms ?? Transportation ?? More work, not farming ?? Education ?? Training/trainers ?? More personal information delivery ?? Use of radio and T.V. for information delivery ?? Advice/counseling ?? Park/recreation for parents ?? Tutors that come to homes ?? WIC in Williams ?? Advanced ESL classes ?? Classes for pregnant women ?? Hospital with better services for pregnant women
Issues/Concerns/Barriers	<ul style="list-style-type: none"> ?? Language ?? Help for working parents/persons

Arbuckle

Children's Needs	<ul style="list-style-type: none"> ?? Preschool for all children, not just income qualified ?? Well stocked and open library ?? Extended care/extended school hours (in kindergarten children need more experience) ?? Parks and recreation programs ?? Program with tobacco education ?? Structured recreation programs with activities for homework, science, tutoring; physical; library ?? Local health services, primary and emergency care/clinic ?? Public health services for schools ?? Counseling services – schools limited to one day/week ?? Licensed day care, especially infant ?? Care for school age children ?? Dental hygiene as part of daycare/school; sealants ?? Extended services for migrant children ?? Quality of school testing; account for transient and language barriers ?? Child care for ages 0-5 ?? Pharmacy ?? Fast food restaurant ?? Nurse visits for mothers with new babies ?? Park with equipment & games for children 0-5; safe & clean ?? Head Start program for ages 0-3
Parent's Needs	<ul style="list-style-type: none"> ?? Resource/life-skills advice system; including language services ?? Generic parent support/advice line ?? Parent education related to child development and growth; pharmacy ?? Accurate data about Colusa school test which isn't skewed by language/transient issues ?? Outreach to explain what school test scores mean; keep kids in local schools ?? Local based services ?? More accessible services (hours of availability) ?? Preschool as hub for family services (health, dental, counseling) ?? More personal outreach and contacts with parents ?? Ombudsman as cultural/language go-between – translate/navigate wide variety of issues ?? Home visits for all new parents in Colusa County ?? Resource library ?? Town doctor ?? Transportation ?? More stores ?? More job opportunities
Issues/Concerns/Barriers	<ul style="list-style-type: none"> ?? Cultural differences related to school-parent relationship; child development issues ?? Transient population ?? Language

Arbuckle

Issues/Concerns/Barriers (continued)	?? No physical site/location for local services ?? Money for services ?? Fees for services (child care, after-school programs) ?? Informing families about available services ?? Long work hours – parents only able to attend to basic needs ?? No access to raw data for school test scores
Ideal Services	?? 24-hour access ?? Bi-lingual (English to Spanish; Spanish to English) ?? All children bi-lingual by age 10 ?? Value and recognize cultural differences ?? Non-intimidating service delivery ?? Access for all families (no stigma associated with services; not income driven) ?? Inclusive: not categorized by risk

Grimes

The town meeting in Grimes was held in an informal manner without summarizing the findings on flip charts during the group discussion. However, a number of consistent needs were identified during the discussion:

- ?? More education in English and other efforts to overcome language barriers are needed for Spanish-speaking people.
- ?? The need for more “parent education” was consistently raised. From the discussions, two distinct themes were identified – the need for more education regarding how to parent, and the need for more *general* education *for* parents (e.g. literacy) so the parents are better able to assist their children.
- ?? More jobs and more jobs paying a living wage are needed.
- ?? Lack of medical insurance and availability of local health services is a major challenge.
- ?? Access to transportation is another major challenge.
- ?? More / better park facilities for children are strongly desired.
- ?? More child care services are needed.
- ?? More information about services and bringing services closer to Grimes would make them much more accessible.

APPENDIX C: PARENT SURVEY RESULTS

This appendix contains the results of a survey conducted during February and March 2000, targeted to parents of young children seeking input on needs, barriers to accessing services, and desired services. A total of 50 responses were received to the survey. Not all persons answered each question, so some questions reflect a lower response rate.

Tell Us About You and Your Family

1. **Your gender:** Male – 8 (14%) Female – 51 (86%)
2. **Zip Code of your residence:**

Arbuckle (95912)	8 (14%)
Colusa (95932)	16 (27%)
Maxwell (95955)	19 (32%)
Williams (95987)	5 (8%)
Grimes (95950)	8 (14%)
Unidentified	3 (5%)
3. **Please indicate your ethnicity:**

African American	0
American Indian	1 (2%)
Asian- American/Pacific Islander	0
Caucasian	17 (29%)
Latino/Chicano/Hispanic	41 (69%)
Other	0
4. **Your age in years:** Average age of respondents was 35 years old. Breakdown by age group

Age 21 – 29	14 (24%)
Age 30 – 39	34 (58%)
Age 40 – 49	6 (10%)
Age 50+	4 (7%)
Unidentified	1 (1%)
5. **How many children live in your household?** Average of 2.2 children. Profile by age

Have at least one child age 0 – 5	43 (73%)
All children are age 6 – 18	11 (19%)
No children / children older than 18	5 (8%)
6. **Do any of your children have special needs?** Yes – 5 (8%) No – 54 (92%)
Type of needs:

Learning challenges	5
Physical challenges	0
Other	0

7. **Are you currently pregnant, or expecting a child?** Yes – 6 (10%) No – 53 (90%)

8. **How many years of school did you complete?** Highest level of educational attainment:

Through 8 th grade or less	18 (31%)
Some high school	6 (10%)
High school diploma / GED	6 (10%)
Some college	10 (17%)
Vocational/technical school	3 (5%)
College bachelor's degree	10 (17%)
College graduate degree	5 (8%)
Unidentified	1 (1%)

9. **What language do you primarily speak at home?**

Spanish	34 (58%)
English	18 (31%)
Both English and Spanish	7 (12%)

10. **Are you employed?**

Yes	39 (66%)
No	19 (32%)
No response	1 (1%)

11. **Who provides day care for your child / children?**

Licensed home-based child care	10 (17%)
Child care center	8 (14%)
Head Start program	4 (7%)
Adult family member	11 (19%)
Friend or neighbor	7 (12%)
Other	1 (1%)
Not applicable or no response	17 (29%)

12. **Do you have health insurance?** Yes – 31 (53%) No – 27 (46%) No response – 1 (1%)

If yes, type of health insurance plan you are covered under:

MediCal	6 (19%)	Note: all percentages computed as a percent of those parents with insurance (n = 31)
Healthy Families	2 (6%)	
Private insurance	19 (61%)	
VA / military plan	0	
Other	3 (10%)	
Unknown	1 (4%)	

Does your insurance cover:

Dental care?	Yes – 25 (81%)	No – 6 (19%)
Vision care?	Yes – 25 (81%)	No – 6 (19%)
Prescriptions?	Yes – 26 (84%)	No – 5 (16%)

12. **Do your children have health insurance?** Yes – 44 (75%) No – 13 (22%)
Not applicable or no response – 2 (3%)

If yes, type of health insurance plan your children are covered under:

MediCal	11 (25%)	Note: all percentages computed as a percent of those children with insurance (n = 44)
Healthy Families	10 (23%)	
Private insurance	19 (43%)	
VA / military plan	0	
Other	3 (7%)	
Unknown	1 (2%)	

Does your children's insurance cover:

Dental care?	Yes – 35 (80%)	No – 9 (20%)
Vision care?	Yes – 35 (80%)	No – 9 (20%)
Prescriptions?	Yes – 37 (84%)	No – 7 (16%)

Tell Us About Your Family's Needs

13. **What are the biggest problems or challenges affecting the well-being of your young children (age 0 – 5)?**

<u>Item</u>	<u># Identifying</u>
Health / dental care availability	34
Child care availability, appropriateness	30
Transportation	15
Parent education and skills development	11
Preschool availability and affordability	10
Playgrounds / parks availability, equipment, safety	7
Need recreation programs, extracurricular activities, play groups	5
Lack of well stocked, open library (books, toys, materials)	3
Medical / dental insurance	3
Finances (costs / payments required for children)	3
Lack of art / cultural enrichment programs	2
Language	2
Language development	2
Need a community center	1
Lack of local support system (family, friends)	1
Nurturing	1
Nutrition	1
Abuse between children	1
Timely vaccinations	1

14. **What are the biggest problems or challenges affecting you as a parent?**

<u>Item</u>	<u># Identifying</u>
Language barriers, language education	21
Transportation	19
Parent education, support, interaction with other parents	16
Not enough play areas, play groups, extracurricular activities	11
Lack of health care services (doctors, emergency, pharmacy)	10
Child care access, costs	10
Jobs	10
Spending enough quality time with children	3
Quality housing	2
Services for working parents	2
Affordable health insurance for parents	2
Good info on school quality	1
Need more "adult time", no part-time / drop-in child care	1
Connection / access to community services	1
Being a single parent	1
Safety	1
Abuse	1
Problems with relatives	1

15. **Listed below are a series of issues that may affect young children and families. On a scale of 1 to 5, with 1 being "not a problem or challenge " and 5 being "very large problem or challenge", please identify how significant each issue is for your household.**

	<u># Responses</u>	<u>Avg. Rating</u>	<u># Rated as 5</u>
Access to health / medical care for you	52	3.5	28
Access to health / medical care for your children	52	3.5	28
Access to dental care for your children	52	3.5	26
Access to affordable child care	19 (*)	2.7	5
Ability to get enough food for the family	52	2.8	17
Ability to get adequate housing for the family	52	2.7	18
Parenting skills, need for parenting education	52	3.5	26
Drug and/or alcohol abuse	51	2.2	8
Fighting / violence in the home	51	1.6	3
Transportation to reach jobs or services	51	3.1	23
Ability to read to / with children	21 (*)	2.1	3
Toys and other play options for children	51	3.2	21
Learning about community resources	51	3.8	27

(*) These two questions were inadvertently omitted from the Spanish version of the survey, so fewer responses are available and results are likely to be skewed.

16. **What other issues, problems or challenges facing unborn children, children age 0-5 or families with young children should the Colusa County Children and Families Commission try to address?**

<u>Item</u>	<u># Identifying</u>
Prenatal programs, more attention to pregnant mothers	8
Parenting classes	6
Activities and meeting places for kids, better parks	6
Health care services	5
Adequate day care facilities	4
Language and literacy barriers for parents	3
Lack of insurance	2
Transportation	2
Bi-lingual education for young children	1
Help for young mothers	1
Lack of community center	1
Education in diversity, meeting cultural needs	1
Make services more equitable for all towns in the county	1
Prenatal drug / alcohol exposure	1
Preschool choices	1
Materials to promote reading to children	1
More information about services	1
No more vaccinations on Tuesdays in Colusa	1
Need more jobs	1

Tell Us How to Improve Services to Meet Your Family's Needs

17. **Listed below are various existing services for young children and families that are available in Colusa County. Please identify all of the services that you are familiar with, meaning all services that you have heard about and have a general understanding of what they are.**

Medi-Cal	50 (85%)
Healthy Families	33 (56%)
Head Start	49 (83%)
Food stamps	43 (73%)
Casa de Esperanza	29 (49%)
Prenatal care	40 (68%)
Child Protective Services	33 (56%)
Parent education	29 (49%)
Migrant Education	36 (61%)
Women, Infants and Children (WIC)	49 (83%)
Child care resource & referral	38 (64%)
(list continued on next page)	

Child care subsidies	26 (44%)
Childcare for Agriculturally Related Employees	31 (53%)
Special education	23 (39%)
CalWORKs	12 (20%)
Healthy Start	14 (24%)

18. **Listed below are possible barriers to using available community services. On a scale of 1 to 5, with 1 being "not a barrier " and 5 being "very large barrier", please identify how significant each item is for your household.**

	<u># Responses</u>	<u>Avg. Rating</u>	<u># Rated as 5</u>
Not enough information about services	49	3.7	25
Cost is too high	50	4.0	27
Application process is difficult	49	3.3	23
Not eligible for services	49	4.1	33
Transportation / can't get to services	50	3.0	18
Service providers don't speak my language	50	3.1	16
Services are not sensitive to our culture	49	2.5	6
Don't want to use government services	48	1.4	2

Please list any other barriers you face in using available services:

<u>Item</u>	<u># Identifying</u>
Not enough information is available about services	7
Need more / better employment	7
Do not qualify for services	5
Services not open / available on weekends or evenings	3
Services are not offered locally	3
Documentation of legal status is required	3
People in charge of services seem intimidating / unapproachable	1
Little assistance for seasonal employees	1
Need more day care	1

19. **How can we make services more accessible or useful to you?**

<u>Item</u>	<u># Identifying</u>
Local services (available in each community)	8
More information / publicity about services	7
Provide transportation / longer hours for transportation	7
Expand qualification criteria for programs / services	6
Make services available on expanded hours (weekends, evenings)	5
Offer services on a sliding fee scale / lower cost	3
Provide temp / drop-in child care to help with access to services	2
Provide English classes or more bi-lingual services	2
More demographically representative mix of service providers	1
Provide home-based services	1

APPENDIX D: PROVIDER SURVEY RESULTS

The following pages contain the results of a separate survey that was issued to service providers and professionals who work directly with young children and families. The survey was issued to a total of 261 people, including all kindergarten – 3rd grade teachers in the county, all child care providers, all county social service agencies offering programs listed in section 4 of this report, all health care providers in the county (hospital, clinics, physicians and dentists), libraries, and other professionals identified by members of the Commission. Out of the 261 surveys, 42 responses were received for a 16.1% response rate. The response rate was materially consistent across each category of provider; for example, teachers responded at approximately the same rate as child care providers and health care providers.

On a number of questions, people were asked to rank their responses in order of significance or priority. The tabulated results therefore show the total number of people identifying a particular issue, the priority rating assigned, and the weighted average priority rating.